



Incident Report

Print Date/Time: 12/21/2015 13:41
Login ID: ss0100

Lake Stevens Police Department
ORI Number: WA0311900

Incident: 2015-00201093

Incident Date/Time: 11/14/2015 3:24:36 PM
Location: SR 9 SE / 32ND ST SE
LAKE STEVENS WA 98258
Phone Number: (425) 344-9836
Report Required: No
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens
Source: 911
Priority: 3
Status: 3
Nature of Call:

Unit/Personnel

Unit	Personnel
19D1	SS0112-Warbis
19D2	SS0072-Aukerman
19D3	SS0075-Christensen
19S10	SS0013-Brooks

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	FOSTER, CINDY		(425) 344-9836			

Vehicle(s)

Role	Type	Year	Make	Model	Color	License	State
------	------	------	------	-------	-------	---------	-------

Disposition(s)

Disposition	Count
O	2
R	1

Property

Date	Code	Type	Make	Model	Description	Tag No.	Item No.
------	------	------	------	-------	-------------	---------	----------

CAD Narrative

11/14/2015 : 15:44:33 SP0168 Narrative: NOT INSIDE THE CITY LIMITS

11/14/2015 : 15:34:49 SP0370 Narrative: 4 GRN PTS

11/14/2015 : 15:33:05 SP0370 Narrative: 1 MINI VAN AND FV ON WHEEL

11/14/2015 : 15:33:05 SP0370 Narrative: 1 MINI VAN AND FV ON WHEEL

11/14/2015 : 15:29:16 SP0338 Narrative: STATE SAYS THIS IS LKS CITYS CALL FOR POLICE

11/14/2015 : 15:26:14 SP0338 Narrative: SB LN

11/14/2015 : 15:26:10 SP0168 Narrative: AGENCY ADVISED

11/14/2015 : 15:25:51 SP0338 Narrative: TAN RV L/101MGD? VS BLK MINIVAN

11/14/2015 : 15:25:14 SP0338 Narrative: 2 CAR REAR END, NON BLKING, UKN INJ


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591971

REPORT NO. E482908
CASE # 15-0201093
LOCAL AGENCY CODING
TOTAL # OF UNITS 02 **OBJECT STRUCK**
TRIBAL RESERVATION

M	M	D	D	Y	Y	Y	Y	TIME (2400)	COUNTY #	MILES	N	E	IN	CITY #	
DATE OF COLLISION	11	-	14	-	2015			1525	31	00	40	S	W	OF	0664

ON (PRIMARY TRAFFIC WAY) INTERSECTION ☐ **NON-INTERSECTION** ☒
SR 9 SE **BLOCK NO.** ☒ **3100** **MILE POST**

DISTANCE	60	00	MILES	N	W	E	S	OF (REFERENCE OR CROSS STREET)	32ND ST SE
----------	----	----	-------	---	---	---	---	--------------------------------	------------

UNIT 01 **MOTOR VEHICLE** ☒ **PEDAL-CYCLE** ☐ **DAMAGE THRESHOLD MET** ☒ **PHONE**
LAST NAME ADAMS **FIRST NAME RAINBOW** **MIDDLE INITIAL R**
STREET NEW ADDRESS **HOMELESS**
CITY LAKE STEVENS **ST WA** **ZIP 98258**
CDL **RESTRICTIONS** **ENDORSEMENTS**
DRIVER'S LICENSE # ADAMSRR148Q1 **STATE WA** **SEX F** **D.O.B. MMDDYYYY 11 - 21 - 1986**
ON DUTY ☐ **STATUS** **AIRBAG 1** **RESTR. 9** **EJECT 1** **HELMET USE 2** **INJURY CLASS 1** **NATURE OF INJURIES**
LICENSE PLATE # 101MGD **STATE WA** **VIN# M50CA9T523194**
TRAILER PLATE # **STATE** **TRAILER PLATE #** **STATE**
VEH. YEAR 1980 **MAKE WIN** **MODEL 30 MH** **STYLE** **VEHICLE TOWED YES** ☐ **NO** ☒ **TOWED BY** **GOVT. VEHICLE YES** ☐ **NO** ☒
REGISTERED OWNER INFO.
LIABILITY INSURANCE IN EFFECT ☐ **INSURANCE CO & POLICY #**
VEHICLE LEGALLY STANDING ☐ **YES** ☐ **NO** ☐ **CITATION #** **CHARGE**
UNIT 02 **MOTOR VEHICLE** ☒ **PEDAL-CYCLE** ☐ **PEDESTRIAN** ☐ **PROPERTY OWNER** ☐ **DAMAGE THRESHOLD MET** ☒ **PHONE**
LAST NAME FOSTER **FIRST NAME CINDY** **MIDDLE INITIAL A**
STREET NEW ADDRESS **7527 33RD ST NE**
CITY MARYSVILLE **ST WA** **ZIP 982707000**
CDL **RESTRICTIONS** **ENDORSEMENTS**
DRIVER'S LICENSE # FOSTECA314KF **STATE WA** **SEX F** **D.O.B. MMDDYYYY 05 - 06 - 1969**
ON DUTY ☐ **STATUS** **AIRBAG 2** **RESTR. 9** **EJECT 1** **HELMET USE 2** **INJURY CLASS 7** **NATURE OF INJURIES STATED NECK PAIN**
LICENSE PLATE # 498YXX **STATE WA** **VIN# 2D8HN54X28R706799**
TRAILER PLATE # **STATE** **TRAILER PLATE #** **STATE**
VEH. YEAR 2008 **MAKE DODG** **MODEL CAVAN** **STYLE SV** **VEHICLE TOWED YES** ☐ **NO** ☒ **TOWED BY** **GOVT. VEHICLE YES** ☐ **NO** ☒
REGISTERED OWNER INFO. CINDY FOSTER 7527 33RD ST NE MARYSVILLE WA 98270
LIABILITY INSURANCE IN EFFECT ☒ **INSURANCE CO & POLICY # PEMCO CA 1098503**
VEHICLE LEGALLY STANDING ☐ **YES** ☐ **NO** ☐ **CITATION #** **CHARGE**
OFFICER'S NAME (PRINT) W. AUKERMAN **BADGE OR ID # 0072** **AGENCY WA0311900**


**STATE OF WASHINGTON
POLICE TRAFFIC
COLLISION REPORT**


1591972

CORRECTION

REPORT NO. **E482908**CASE # **15-0201093**
ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME (LAST, FIRST, MIDDLE INITIAL)		FOSTER AALIYAH A																		
ADDRESS & PHONE # 7527 33RD ST NE MARYSVILLE WA 982707000														SEX F	D.O.B. MMDDYYYY 03	-	22	-	2004	
PASSENGER	<input checked="" type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #	2	SEAT POS.	6	AIRBAG	2	RESTR.	9	EJECT	1	HELMET USE	2	INJURY CLASS	7	NATURE OF INJURIES HIT HEAD DURING COLLISION		
NAME (LAST, FIRST, MIDDLE INITIAL)																				
ADDRESS & PHONE #														SEX	D.O.B. MMDDYYYY	-		-		
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES		
NAME (LAST, FIRST, MIDDLE INITIAL)																				
ADDRESS & PHONE #														SEX	D.O.B. MMDDYYYY	-		-		
PASSENGER	<input type="checkbox"/>	WITNESS	<input type="checkbox"/>	UNIT #		SEAT POS.		AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES		

NARRATIVE

On 11/14/2015 at about 1525 hours (all times approximate) I responded to a two vehicle collision outside of the city of Lake Stevens at the intersection of 32nd Street SE and State Route 9 SE. Arriving on scene I spoke with both driver's involved. Based on evidence and statements at the scene it is found that U1 and U2 had been traveling southbound on SR 9 SE approaching the traffic light controlled intersection of 32nd Street SE. The driver of U2 stated she observed U1 (a motorhome) approaching her vehicle from behind as the traffic light had turned to green. The driver of U2 stated it appeared U1 was going to rear end her vehicle so she attempted to quickly accelerate away (forward) to avoid the collision, however U1 still collided into the back of U2 causing extensive damage to the back of U2. The driver of U1 stated she had just picked up the motorhome in Granite Falls and was traveling southbound on SR 9 when she attempted to stop for stopped vehicle traffic at the red light located at 32nd Street. The driver of U1 stated the traffic light had just turned to green. The driver of U1 stated she tried to stop and that the motorhome began skidding forward, not stopping, and collided into the back of U2.

The driver of U1 stated she does not have current vehicle insurance on U1 (a motorhome). The driver of U2 stated she had neck pain and commented that her child had hit her head during the collision. The driver of U1 mentioned no possible injury.

Both vehicles were driven from the scene of the collision.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

W. AUKERMAN**11-14-15 05:17 PM**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

DATED

PLACE SIGNED

APPROVED BY

DATE

K. BERNHARD 0120**11/16/2015 11:02:25 PM**

BADGE OR ID #

0072

ORI #

WA0311900

TIME POLICE DISPATCHED

3:25 PM

TIME POLICE ARRIVED

3:30 PM

REPORT NO. E482908

CASE # 15-0201093

DATE AND TIME
OF COLLISION 11/14/15 15:25

